

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>MD</i>		4/1/01
FORMALITY REVIEW	<i>mk</i>	52569	4/23/01
RESPONSE FORMALITY REVIEW	<i>lt</i>	917	7-24-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	4/1/01
2	✓	✓	4/1/01
3	✓	✓	4/1/01
4	✓	✓	4/1/01
5	✓	✓	4/1/01
6	✓	✓	4/1/01
7	✓	✓	4/1/01
8	✓	✓	4/1/01
9	✓	✓	4/1/01
10	✓	✓	4/1/01
11	✓	✓	4/1/01
12	✓	✓	4/1/01
13	✓	✓	4/1/01
14	✓	✓	4/1/01
15	✓	✓	4/1/01
16	✓	✓	4/1/01
17	✓	✓	4/1/01
18	✓	✓	4/1/01
19	✓	✓	4/1/01
20	✓	✓	4/1/01
21	✓	✓	4/1/01
22	✓	✓	4/1/01
23	✓	✓	4/1/01
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28	✓	✓	4/1/01
29	✓	✓	4/1/01
30	✓	✓	4/1/01
31	✓	✓	4/1/01
32	✓	✓	4/1/01
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42	✓	✓	4/1/01
43	✓	✓	4/1/01
44	✓	✓	4/1/01
45	✓	✓	4/1/01
46	✓	✓	4/1/01
47	✓	✓	4/1/01
48	✓	✓	4/1/01
49	✓	✓	4/1/01
50	✓	✓	4/1/01

Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

C.C.
04-24-01
C-57